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## BIB DATA SHEET

CONFIRMATION NO. 5514

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT                         | ATTORNEY DOCKET<br>NO.  |                               |                                    |
|--|---|--|--|---|-------------------------------|------------------------------------|
| 10/723,908   | 11/26/2003  | 424  | 1645                                   | 0459-0752P  |                               |                                    |
| <b>RULE</b>  |   |  |  |   |                               |                                    |
| <b>APPLICANTS</b><br>Peter Andersen, Bronshoj, DENMARK;<br>Rikke Louise Vinther Skjot, Frederiksberg C, DENMARK;<br><b>** CONTINUING DATA *****</b><br>This application is a CON of 09/615,947 07/13/2000 ABN<br>which claims benefit of 60/144,011 07/15/1999<br><b>** FOREIGN APPLICATIONS *****</b><br>DENMARK PA 1999 01020 07/13/1999<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>03/18/2004 |   |  |  |   |                               |                                    |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /ROD P SWARTZ/<br>Acknowledged Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR<br/>COUNTRY</b><br>DENMARK | <b>SHEETS<br/>DRAWINGS</b><br>6   | <b>TOTAL<br/>CLAIMS</b><br>45 | <b>INDEPENDENT<br/>CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>BIRCH STEWART KOLASCH & BIRCH<br>PO BOX 747<br>FALLS CHURCH, VA 22040-0747<br>UNITED STATES  |   |  |  |   |                               |                                    |
| <b>TITLE</b><br>TUBERCULOSIS VACCINE AND DIAGNOSTICS BASED ON THE MYCOBACTERIUM TUBERCULOSIS SAT-6 GENE FAMILY   |   |  |  |   |                               |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>1794   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                               |                                    |